

AF/2811
JFW

PTO/SB/21 (08-03)

Approved for use through 07/31/06. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

6

Application Number

09/164,216

Filing Date

September 30, 1998

First Named Inventor

Ronald Pasqualini

Group Art Unit

2811

Examiner Name

Nadav, Ori

Attorney Docket Number

100-11504 (P03921-C4)

ENCLOSURES (check all that apply)

☒ Fee Transmittal Form (in duplicate)

☒ Fee Attached (check for \$340)

☐ Amendment/Response

☐ After Final (Response)

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/
Incomplete Application

☐ Response to Missing
Parts under 37 CFR
1.52 or 1.53

☐ Assignment Papers
(for an Application)

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition Routing Slip (PTO/SB/69)
and Accompanying Petition

☐ Petition to Convert to a
Provisional Application

☐ Power of Attorney, Revocation
Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ After Allowance Communication to
Group

☒ Appeal Communication to Board of
Appeals and Interferences
(in duplicate)

☐ Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Inquiry

☒ Other Enclosure(s)
(please identify below):

**Return Receipt Postcard
Certificate of Mailing**

Remarks

**Please charge any necessary fees or credit overpayment to
Deposit Account No. 502305. A duplicate copy of this
transmittal is attached for this purpose.**

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

Mark C. Pickering, Reg. No. 36,239

Signature

Mark C. Pickering

Date

November 15, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: November 15, 2004

Typed or printed name Robin L. King

Signature

Robin L. King

Date

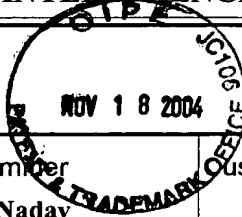
November 15, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO
THE BOARD OF PATENT APPEALS AND INTERFERENCES (Large Entity)**

Docket No.
100-11504

In Re Application Of: **Ronald Pasqualini**



Application No.
09/164,216

Filing Date
09-30-98

Examiner
O. Nadav

Customer No.
33402

Group Art Unit
2811

Confirmation No.

Invention:

ESD PROTECTION CIRCUIT UTILIZING FLOATING LATERAL CLAMP DIODES

COMMISSIONER FOR PATENTS:

Applicant(s) hereby appeal(s) to the Board of Patent Appeals and Interferences from the decision of the Primary Examiner dated **09-01-04** finally rejecting Claim(s) **15, 19, 38, 39, 45-57, 60-62, 65, 66 and 69-72.**

The fee for this Notice of Appeal is: **\$340.00**

- ☒ A check in the amount of the fee is enclosed.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. **33402**
- ☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.


Signature

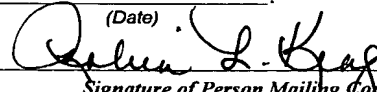
Dated: **November 15, 2004**

CC:

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

11-15-04

(Date)



Signature of Person Mailing Correspondence

Robin L. King

Typed or Printed Name of Person Mailing Correspondence

FEE TRANSMITTAL**For FY 2005**

Patent Fees are subject to annual revision.

TO TREASURY OF PAYMENT \$340.00

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge any fees or credit any overpayment under 37 CFR 1.16 and 1.17 which may be required by this paper to Deposit Account No. 502305

LAW OFFICES OF MARK C. PICKERING☐ Applicant claims small entity status. See 37 CFR 1.27.2. ☒ **Payment Enclosed:**☒ Check ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

LARGE ENTITY		SMALL ENTITY		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	790	2001	395	Utility	
1002	350	2002	175	Design	
1003	550	2003	275	Plant	
1004	790	2004	395	Reissue	
1005	160	2005	80	Provisional	
SUBTOTAL (1)					0

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims	Fee from below	Fee Paid
Total Claims	* - 20 **	= 0	x 18	= \$ 0
Independent	* - 3	= 0	x 88	= \$ 0
Multiple Dep.			*	= \$ 0

** or number previously paid, if greater; for Reissues, see below:

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claim in excess of 20
1201	88	2201	44	Independent claims in excess of 3
1203	300	2203	150	Multiple dependent claim, if not paid
1204	88	2204	44	** Reissue ind. claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$0**Complete if Known**

Application Number	09/164,216
Filing Date	September 30, 1998
First Named Inventor	Ronald Pasqualini
Examiner Name	Nadav, Ori
Group Art Unit	2811
Attorney Document No.	100-11504 (P03921-C4)

FEE CALCULATION (continued)**3. Additional Fees**

Large Entity Small Entity

Fee Code	Large Entity	Small Entity	Fee
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2520	1812	2520
1804	920	1804	920
1805	1840	1805	1840
1251	110	2251	55
1252	430	2252	215
1253	980	2253	490
1254	1530	2254	765
1255	2080	2255	1040
1401	340	2401	170
1402	340	2402	170
1403	300	2403	150
1451	1510	1451	1510
1452	110	2452	55
1453	1370	2453	685
1501	1370	2501	685
1502	490	2502	245
1503	660	2503	330
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	790	2809	395
1810	790	2810	395
1801	790	2801	395
1802	900	1802	900

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3)** \$340**SUBMITTED BY**

Law Offices of Mark C. Pickering
P.O. Box 300
Petaluma, CA 94953-0300
Telephone: (707) 762-5583
Facsimile: (707) 762-5504
Customer No. 33402

Date:

By:

Mark C. Pickering, Reg. No. 36,239